



ENGINEERING DEPARTMENT

276 Fourth Avenue Chula Vista CA 91910

619-691-5021

619-691-5171 FAX

FORM 5517

DRIVEWAY  
VARIANCE  
APPLICATION

File No. 0710-29-PA-005

Application Fee: \$250.00

(Acct. No. 13360-3741, Trans 3802)

Job Location \_\_\_\_\_

APN \_\_\_\_\_

Company/Applicant's name \_\_\_\_\_

Phone No. \_\_\_\_\_

Mailing address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

This request is for: [ ] Widening existing driveway. Total width: \_\_\_\_\_ Feet

[ ] Additional driveway with a total width of: \_\_\_\_\_ Feet

[ ] Location of driveway.

Lot Frontage: \_\_\_\_\_ Feet 40% of Lot Frontage: \_\_\_\_\_ Feet

If Variance is for second driveway, width of existing (including flares): \_\_\_\_\_ Feet

Reason for request: \_\_\_\_\_

**NOTE:** Applicant to include drawing or sketch showing location of any existing and/or proposed driveways. Sketch should show: dimensions of all driveways; their locations in relation to side property lines and curb returns (street corners).

Signature of owner or agent: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name if agent only: \_\_\_\_\_